



## Administrative Policies and Procedures: 11.1

<b>Subject:</b>	<b>Assessment Process</b>
<b>Authority:</b>	TCA 37-5-105, 37-5-106
<b>Standards:</b>	COA: AS2: 2; CM:3; CPS:6; CPS:7; FC:2; GLS:3; KC:2; RTX:3; YIL:4
<b>Application:</b>	To All Department of Children's Services Employees

### Policy Statement:

The Department shall utilize comprehensive, individualized, strengths-based, culturally responsive assessments and processes to determine the family's strengths, skills, motivation for change, and immediate and on-going needs. Assessment shall be a continuous process throughout the life of the case.

### Purpose:

To ensure child safety and strengthen families, many critical pieces of information must be gathered and considered. The assessment process should explore underlying causes of child maltreatment or risk of abuse and neglect, factors that prevent the family from making the necessary changes to keep its children safe, community risks to youth, formal and informal community supports, possible mental or physical health issues, and signs of substance abuse or domestic violence.

### Procedures:

<b>A. Assessment tools</b>	<p>Various assessment tools used by DCS include, but are not limited to:</p> <ol style="list-style-type: none"><li><b>1. Early Periodic Screening Diagnosis and Treatment (EPSD&amp;T)</b> Each TennCare eligible child/youth in DCS custody must receive an <b>annual</b> Early Periodic Screening Diagnosis, and Treatment (EPSDT) <b>screening</b> conducted by the local health department in accordance with the <i>American Academy of Pediatric</i> periodicity schedule. (Refer to DCS Policy <a href="#">20.7, <i>TennCare Early Periodic Screening-Diagnosis and Treatment.</i></a>)</li><li><b>2. Family Functional Assessment</b> This assessment tool is designed to help guide employees in gathering information on the past, present and future of a family by continuously evaluating the family's strengths and underlying needs, concerns and challenges and to build supportive teams with children and families which will last beyond agency involvement; and lastly, lead to the development of individualized plans utilizing family strengths and solutions. (Refer to DCS Policy <a href="#">11.4, <i>Family Functional Assessment Process.</i></a>)</li><li><b>3. Structured Decision Making (SDM) Child Abuse/Neglect Screening</b></li></ol>
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	<p><b>Criteria</b></p> <p>A tool used immediately upon receipt of a report of abuse/neglect to gather all available information to determine whether the report meets DCS criteria to initiate an investigation.</p> <p><b>4. Structured Decision Making (SDM) Response Priority Decision Trees</b></p> <p>A tool used to determine how quickly face-to-face contact must be initiated for assigned investigations.</p> <p><b>5. Structured Decision Making (SDM) Safety Assessment</b></p> <p>A tool to guide the decision to leave children in the home <u>or</u> protectively place children out of the home based on observed threats of immediate harm and the availability of interventions to mitigate safety concerns.</p> <p><b>6. Structured Decision Making (SDM) Family Risk Assessment</b></p> <p>A tool to estimate the likelihood of future maltreatment. Guides the decision to open a case for on-going services or not.</p> <p><b>7. Structured Decision Making (SDM) Family Risk Reassessment (for Non-Protective Custody Cases)</b></p> <p>A tool to guide the decision to close a case and, for cases that remain open, the minimum contact standards.</p> <p><b>8. Child and Adolescent Needs and Strengths (CANS)</b></p> <p>A tool that provides a context for communicating and making decisions about care. The CANS consists of approximately sixty-five (65) items to evaluate how the department and its partners should act in the best interests of children and families (see <a href="#">CANS Case Protocol</a>).</p> <p><b>9. Youth Level of Service/Case Management Inventory (YLS/CMI)</b></p> <p>A tool to identify both risk and protective factors that are present in a child's life that either promote or prevent delinquent behavior. Such factors include parenting skills, conditions within the home and family, parent/sibling criminality, school involvement, peer influence, leisure activities, current and previous delinquency, severity of offenses, alcohol/drug usage and others. Depending upon the presence or absence of such factors, a risk score of low, moderate, high or very high is determined. It also serves as a guide for case planning by identifying those factors that present the highest level of risk for promoting further delinquent behavior.</p> <p><b>10. Family Advocacy Support Tool (FAST)</b></p> <p>A tool to help address the needs of the MRS reformation of current CPS practice and to further streamline the assessment processes. This tool will be employed in conjunction with the newly developed Tennessee Child and Adolescent Needs and Strengths (<a href="#">CANS</a>) <a href="#">Case Protocol</a>.</p> <p><b>11. Ansell-Casey Life Skills Assessment (ACLSA)</b></p> <p>A tool to assess a youth's knowledge of the following life skill areas: <i>Career Planning, Communication, Daily Living, Home Life, Housing and Money Management, Self-Care, Social Relationships, Work Life and Work and Study Skills</i>. The assessment results are useful for goal setting, program planning,</p>
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	<p>and for measuring progress on life skill acquisition.</p> <p><b>12. Structured Analysis Family Evaluation (SAFE)</b></p> <p>A tool designed to evaluate families for adoption, resource home approval, concurrent planning, and relative placement. SAFE is built upon solid social work practice values that stress the importance of respectfully engaging families in a strength based, mutual evaluation process that strives to select families in, not out. SAFE is a suite of home study tools for the psychosocial evaluation of prospective adoptive families, foster families; relative care providers, resource families and concurrent planning families. SAFE results in a comprehensive home study report.</p> <p><b>13.</b> Time frames for implementation/completion of assessments and those required for each case type or program will be outlined in assessment training, DCS policies and procedures, and/or current practice.</p>
<b>B. Goals of assessment</b>	<p>The goals of the assessment process are to:</p> <ol style="list-style-type: none"> <li>1. Identify patterns of success and failure in the service delivery system;</li> <li>2. Provide for the development of flexible service standards based on specific needs;</li> <li>3. Allow more effective and efficient service provision and resource utilization;</li> <li>4. Provide a consistent measurement criteria on which to base service decisions;</li> <li>5. Increase credibility through valid and reliable measures and case management;</li> <li>6. Increase employee comfort and confidence in using assessment tools;</li> <li>7. Promote team-focused quality decision making; and</li> <li>8. Access specialized assessments as needed.</li> </ol>
<b>C. Responsibility</b>	<p>All employees that work with child and family assessments, as applicable, shall ensure that the assessments are conducted appropriately and contain current and accurate information on the child/youth/family for each case type or program.</p>
<b>D. Training</b>	<p>All employees who will be utilizing assessment tools will receive appropriate training and/or certification. Assessment training will be documented in each employee's training record and maintained by the Office of Professional Development.</p>

<b>Forms:</b>	None
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<b>Collateral documents:</b>	<i>Assessment Tools</i> <a href="#"><u>CANS Case Protocol</u></a>
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